

Commonwealth of Massachusetts

Manufactured Buildings Program

Transmittal Form for all correspondences relating to Manufactured Buildings and Building Components

То:	Name of Recipient				Date Transmitted		
Name of Agency or Department							
Address of Agency or Department Street Name & Number							
City		State			Zip Code		
From:	Name of Person Transmitting Information						
Name of Manufacturer or TPIA						MC Number	
Address of Manufacturer or TPIA	Street Name & Number						
City			State			Zip Code	
and Standards and \or the (Please check the approp	he Department priate box or gi labeled <i>other</i> . E	nsmitted to the Board of Build t of Public Safety for reasons d ive a further description of the Be sure to identify Use Group al	ons detailed below of the transmitted		Model and \ Number per	se indicate the Distinct del and \or Serial mber pertaining to smitted items.	
Building plans forwarded as a record copy for your files (review not required).							
Revised building plans for review. (Please clearly identify revisions plans.)			on the				
Revised building plans forwarded as a record copy for your files (review not required - Please clearly identify revisions on the plans.)							
Submission of and\or modifications to the following items. Clearly identify any modifications, and indicate the BBRS\DPS Identification Number on all applicable materials. (Check appropriate box.) All modifications submitted shall be accompanied by an index which clearly identifies pages to be removed and pages to be replaced.							
Compliance Assurance F		Original submission		Modifica			
Calculations Manual		Original submission		Modifica	Modification to:		
Installation Manual		Original submission		Modification to:			
Systems Drawings		Original submission		Modification to:			
Other - Provide a detaile description of any other which are being transmit	materials itted.						
Identify any revisions clearly. Also, identify the requested action.		Street and City or Town of Site Plan:					
This office has reviewed the above mentioned (and attached) materials and found them, to the best of our knowledge and abilities, to be in compliance with the codes and or rules and regulations for the Commonwealth's Manufactured Building Program, as applicable.							
Signed by:						Date:	